

FEC
FORM 1STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full) (Check if name
is changed) Example: If typing, type
over the lines.

12FE4M5

committee to elect kevin eisele

ADDRESS (number and street) p.o. box 211

 (Check if address
is changed)

novato

CA

94948

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

 (Check if address
is changed)

kevinforuscongress@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

 (Check if address
is changed)

kevineisele.com

2. DATE

07 / 29 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00914002

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer eisele, kevin, , mr,

Signature of Treasurer eisele, kevin, , mr,

Date

10 / 14 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 06/2012)

Write or Type Committee Name

committee to elect kevin eisele

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

--	--	--	--

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

eisele, kevin, , mr,

Mailing Address

1537 s novato blvd #211

--	--	--	--

novato

CA

94947

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Custodian of Records

Telephone number

415 - 370 - 8469

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

eisele, kevin, , mr,

Mailing Address

1537 s novato blvd #211

--	--	--	--

novato

CA

94947

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

treasurer

Telephone number

415 - 370 - 8469

Full Name of
Designated
Agent

eisele, kevin, , ,

Mailing Address

1537 s novato blvd #211

novato

CA

94947

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Designated Agent

Telephone number

415

370

8469

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

redwood credit union

Mailing Address

1010 Grant ave

novato

CA

94945

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲